



COPY OF PAPERS
ORIGINALLY FILED

PATENT APPLICATION

2-654

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

**ADMMENDMENT
TRANSMITTAL
FORM**

(to be used for all correspondence after initial filing)

Application Number	09/692,600
Filing Date	10/19/00
First Named Inventor	Thompson, William et al.
Group Art Unit	2654
Examiner Name	Edouard, Patrick Nestor
Attorney Docket Number	CAS0014

ENCLOSURES (Check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Amendment/Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Fee Address Indication Form	<input checked="" type="checkbox"/> Additional Enclosure(s) (please identify below)
<input type="checkbox"/> Response to Missing Parts Incomplete Application	<input type="checkbox"/> Terminal Disclaimer	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Small Entity Statement	
	<input type="checkbox"/> Request for Refund	

Correction to
Preliminary
Amendment

RECEIVED

MAR 04 2002

Technology Center 2600

Remarks:

CORRESPONDENCE ADDRESS



Customer Number or Bar Code Label

20280

(Insert Customer No. or Attach bar code label here)

or ☐ Correspondence address below

Name:	Motorola, Inc.		
Address:	Intellectual Property Department		
	600 North U.S. Highway 45, AN475		
City: Libertyville	State: Illinois	Zip Code:	60048
Country: USA	Telephone: 847-523-2322	Fax:	847-523-2350

Name (Print/Type) Hisashi D. Watanabe

Registration No. 37,465

Signature

Hisashi D. Watanabe

Date

02/05/02

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date:

Typed or printed name: Jennifer Magness

Signature

Jennifer Magness

Date

02/05/02

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

**FEE TRANSMITTAL**
For FY 2001

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT(\$)**0.00**

Application Number

09/692,000

Filing Date

10/19/00

First Named Inventor

Thompson, William et al.

Group Art Unit

2654

Examiner Name

Edouard, Patrick Nestor

Attorney Docket Number

CAS0014

METHOD OF PAYMENT

- 1.
- ☒
- The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit
Account
Deposit
Account
Name

13-4768

Motorola, Inc.

- ☒
- Charge Any Additional Fee Required
-
- Under 37 CFR 1.16 and 1.17
-
- ☐
- Applicant claims small entity status
-
- See 37 CFR 1.27

FEE CALCULATION**1. BASIC FILING FEE**

Large Fee Code	Entity Fee (\$)	Fee Description	Fee Paid
101	710	Utility filing fee	
106	320	Design filing fee	
107	490	Plant filing fee	
108	710	Reissue filing fee	
114	150	Provisional filing fee	

SUBTOTAL (1)

(\$)**0.00****2. EXTRA CLAIM FEES**

Total Claims		Extra Claims	Fee Paid
21	- 21 =	X 18 =	0
Independent Claims		Extra Claims	Fee Paid
3	- 3 =	X 80 =	0

Multiple Dependent

Large Fee Code	Entity Fee (\$)	Fee Description
103	18	Claims in excess of 20
102	80	Independent claims in excess of 3
104	270	Multiple dependent claim, if not paid
109	80	** Reissue independent claims over original patent
110	18	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2)

(\$)**0.00****FEE CALCULATION (continued)****3. ADDITIONAL FEES**

Large Fee Code	Entity Fee (\$)	Fee Description	Fee Paid
105	130	Surcharge - late filing fee or oath	
127	50	Surcharge - late provisional filing fee or cover sheet	
139	130	Non-English specification	
147	2,520	For filing a request for ex parte reexamination	
112	920*	Requesting publication of Sir prior to Examination action	
113	1,840*	Requesting publication of SIR after Examination action	
115	110	Extension for reply within first month	
116	390	Extension for reply within second month	
117	890	Extension for reply within third month	
118	1,390	Extension for reply within fourth month	
128	1,890	Extension for reply within fifth month	
119	310	Notice of Appeal	
120	310	Filing a brief in support of an appeal	
121	270	Request for oral hearing	
138	1,510	Petition to institute a public use proceeding	
140	110	Petition to revive - unavoidable	
141	1,240	Petition to revive - unintentional	
142	1,240	Utility issue fee (or reissue)	
143	440	Design issue fee	
144	600	Plant issue fee	
122	130	Petitions to the Commissioner	
123	50	Petitions related to provisional applications	
126	240	Submission of Information Disclosure Stmt	
581	40	Recording each patent assignment per property (times number of properties)	
146	710	Filing a submission after final rejection (27 CFR § 1.129(a))	
149	710	For each additional invention to be examined (37 CFR § 1.129(b))	
179	710	Request for Continued Examination (RCE)	
169	900	Request for expedited examination of a design application	

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3)

(\$)**0.00****SUBMITTED BY**

Name (Print/Type)

Hisashi D. Watanabe

Reg. No. (Atty/Agent)

37,465

Signature

Date

2/05/02